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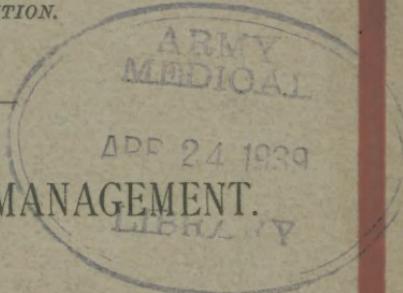
COLUMBIA HOSPITAL

AND

LYING-IN ASYLUM,

A GOVERNMENT INSTITUTION.

ITS PAST AND PRESENT MANAGEMENT.



BY A CITIZEN OF WASHINGTON, D. C.

A

FROM NOVEMBER NO. RICHMOND AND LOUISVILLE MEDICAL JOURNAL.

LOUISVILLE, KY.:

RICHMOND AND LOUISVILLE MEDICAL JOURNAL BOOK AND JOB STEAM PRINT,

104 Green Street, 2d door west of Post-office.

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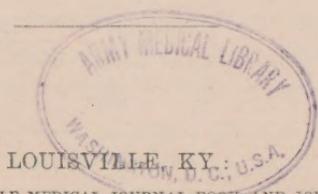
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THE COLUMBIA HOSPITAL.

The Act to incorporate the Women's Hospital Association of the District of Columbia," which was passed by Congress and approved June 1, 1866.

The following are the more important provisions of this Act:

That the object of the Association hereby incorporated "is to found in the city of Washington a hospital and dispensary for the treatment of diseases peculiar to women and a lying-in asylum, in which those unable to pay therefor shall be furnished with board, lodging, medicine, and medical attendance gratuitously, and to that end full powers are hereby conferred on the Association." (Sec. 5).

That "the affairs of said corporation shall be under the control and management of a board of twelve directors (consisting in the beginning of the first twelve of the incorporators named in the act), or such further number as the duties of the incorporation may require." (Sec. 3).

That said corporation shall have "power to accept, purchase, receive conveyances of, and hold property, either personal or real, to an amount necessary for the full accommodation, convenience and support of the institution and those participating in its benefits." (Sec. 6).

That Congress shall have power to "alter, amend, or repeal" the act "at any time hereafter." (Sec. 8).

In the sundry civil appropriation bill of 1872 there was appropriated "for purchase of the building now occupied by said hospital, with forty thousand feet of ground, twenty-five thousand dollars: *Provided*, That the title of said real estate shall be vested in the United States for the use of said hospital, and that no part of the real or personal property now held or hereafter to be acquired by said institution shall be devoted to any other purpose than a hospital for women and a lying-in asylum without the consent of the United States."

These extracts from the charter determine definitely the objects of the institution, and the above clause, quoted from the sundry civil appropriation bill of 1872, fixes the ownership of the "real or personal property now held or hereafter to be acquired by said institution" in the Government of the United States. If anything further was necessary to settle ultimately the rightful ownership of the institution, the annual appropriations made by Congress for its maintenance and support might be cited.

Statement of annual appropriations by Congress for the institution : 1866, \$10,000; 1867, \$10,000; 1868, not obtained—probably \$10,000; 1869, \$15,000; 1870, \$10,000; 1871, \$18,000; 1872, \$18,500; 1873, \$52,000; 1874, \$28,500; 1875, \$32,500; 1876, \$24,000—total \$217,000. Aggregate, including 1868, \$227,000.

This amount does not include the sums (nor the sums contributed by the city government, which were considerable) annually received from "pay-patients," which are unknown quantities, never having been paid into the United States treasury, or in any manner accounted for. Neither the Government of the United States, which has been its munificent almoner from the beginning, nor the public, for whose benefit it was created, have any knowledge whatever of the amount of money received from "pay-patients," nor how it has been expended.

Now that it has been shown that the institution belongs (the claim of a portion of the Directory to the contrary notwithstanding) to the Government of the United States, the next inquiry that presents itself is: Has its management been proper and commendable?

The charter declares the purpose of the Association to be to "found in the city of Washington a hospital and dispensary for the treatment of diseases *peculiar* to women, and a lying-in asylum," yet numbers of women suffering from diseases not "peculiar" to the sex have been admitted to its wards. Cases of consumption, pneumonia, hip-joint disease, malarial, typhoid and remittent fevers, and other affections equally objectionable to the proper hygienic conditions of a lying-in asylum have been admitted.

Chapter XII of the "By-Laws and Regulations," now in force, reads as follows: "Patients will be admitted to private rooms in the institution on payment of not less than \$6 per week, the amount to vary with the room occupied and the attendance required. Board payable weekly in advance. This includes medicine, medical and surgical attendance."

The amount charged varies from \$6 to \$10 a week in an institution owned and supported by the General Government, which has declared its object to be "to found in the city of Washington a hospital for the treatment of diseases peculiar to women and a lying-in asylum, in which *those unable to pay therefor* shall be furnished with board, lodging, medicine, and medical attendance gratuitously." The Congress of the United States did not contemplate, nor does the language of the charter authorize, the establishment of a boarding-house for the reception of women sick with diseases peculiar to the sex or pregnant; yet the Management has so construed section 5 of the act of incorporation, and claims that this feature, thus engrafted upon the institution, has transformed it into a private hospital, which can be conducted irrespective of the rights of the General Government and without responsibility for the sums of money received from this source. The number of pay-patients is probably never less than one-fifth, and occasionally may reach one-third of the daily average of patients in the institution. The daily average of patients for any year since 1866 has not probably exceeded thirty, which, at the maximum charge of \$10 per week for board, lodging, medicine, and medical attendance, would make the daily cost about \$43, or nearly \$16,000 a year. Yet in 1875 Congress appropriated \$32,500 exclusive of the amount received from pay-patients, which, upon the same basis of calculation (one-fifth of the daily average of patients at \$10 per week), would amount to \$3,131, which, added to the appropriation by Congress, would make \$35,631 expended for the support of a daily average of thirty patients for one year, or \$1,187 for each patient per annum. These calculations are based upon a high daily average of patients at the maximum cost of pay-patients fixed by the *by-law* previously cited. But it must be manifest that a number of the

pay-patients (perhaps at all times one-half of their number) do not pay more than \$6 per week, a sum it seems deemed by the authorities adequate to cover cost of "board, lodging, medicine, and medical attendance;" and therefore a rate which should cover the cost of maintaining the pauper patients in an institution free from rent, "taxes and assessments." If the cost of each patient per annum had been estimated upon the basis of \$6 per week, it would have nearly doubled the amount previously named, as the apparent cost per annum per patient.* There need, however, be no speculation as to the daily average or daily cost of patients; for during the past eighteen months the number of patients in the house has been recorded daily, and Congress can require the resident physician to produce the record. With these data and the aggregate amount of expenditures during the same period, any tyro can ascertain the average daily cost of each patient in money, to which should be added the wear and tear of the luxurious and costly furniture which adorns certain apartments. It will doubtless not be so easy to ascertain the number of pay-patients or the amount of money which they have paid into the treasury of the institution.

Many of these pay-patients came from the States; whether brought thither by members and Senators or attracted by the ambiguous reputation of its recent chief medical officer, can not of course be ascertained.

In view of the extravagant expenditures made in support of this institution and with the purpose to correct a manifest abuse, a number of physicians residing in this city and connected with other hospitals and medical institutions, presented, through Mr. Stevenson, of Illinois, to the first session of the Forty-fourth Congress, a bill entitled "A Bill to abolish and to establish a new Board of Health for the District of Columbia, and for other purposes" (House bill No. 3,194), which contains the following provision, section 7: "That all appropriations made by Congress for the support of any hos-

* A daily average of thirty patients, including the pay and free, at a weekly cost of \$6 for each patient, would make the weekly cost \$180, or \$9,760 per annum; whereas in 1876 Congress appropriated \$24,000, exclusive of the amount received from the "pay-patients."

pital, either in whole or in part, shall be disbursed under the direction of the Surgeon-General of the United States Army: *Provided*, That the rates allowed by him shall not exceed one dollar per day for each patient actually treated in each hospital," and providing further in section 8, "that no salary shall be paid to any medical officer other than the resident physician connected with any hospital supported in whole or in part by the Government of the United States." The allowance of one dollar per day was based upon the ascertained cost of each patient per day in the army hospitals and upon the contract made by the Government with the authorities of Providence Hospital for the maintenance of the transient sick paupers, for which Congress for many years has made annual appropriations. If the Government can maintain sick soldiers at a cost not exceeding one dollar per day, and transient sick paupers at a cost not exceeding six dollars per week, why must it pay more than three dollars per day (including those who are supposed to defray their own expenses) for each patient in its hospital for "diseases peculiar to women and a lying-in asylum?"

To recur to the charter. By section 3 the number of directors is limited to twelve, "or such further number as the duties of the corporation may require," and regulation 1, chapter I, prescribes that the "Board of Directors shall consist of not more than fifteen members, with one Senator and two Representatives added to it by act of Congress." The charter and the by-law passed in pursuance thereof are indefinite in regard to the number of directors. Section 2 confers authority upon the Board "to fill all vacancies created by death, resignation or otherwise," and the by-law, chapter I, prescribes that "vacancies occurring in the Board may be filled at any regular meeting." The number is indefinite; the terms of service are unlimited, and the majority of a quorum (seven) possesses the power to fill vacancies at any regular meeting, so that the controlling influence can maintain its ascendancy forever by filling or not filling vacancies, or by increasing the number, as may best suit and secure their purposes, objects and aims. Such provisions of law are against public policy, contrary to the usages of the Government, demoralizing in their tendencies, and

conduce inevitably to the formation of cliques, combinations, and rings, which accept any opportunity to promote their ultimate purposes. No banker or capitalist would engage in an enterprise, with or without a charter, which vested all authority in a Board of Managers indefinite in number, with unlimited terms of service, and with indefinite power to increase its number or fill its vacancies. Honesty is very prone to cease where responsibility terminates. The consonance between the language of the charter and the by-laws passed in pursuance thereof clearly manifests the animus which prompted the authors of the enactment to clothe the powers conferred upon the Association in language so unusual and peculiar. He or they projected a great corporation to be held in perpetuity by themselves, their heirs and assigns. This might be tolerated or excused if any one of the directors had ever contributed one penny towards defraying the expenses of the establishment, or owned a farthing's worth of the property. Even the pen, ink and paper with which their acts, if at all, are recorded, are drawn from the supplies of the Interior Department, and even the printing of letter heads, etc., is done at the Government printing office. The addition to the Board of a Senator and two Representatives by act of Congress in 1872 was another of those ingenious devices to promote the aims of ring-management; for it was easy to secure the selection of friends who would stand sponsors for them on the floors of the two Houses of Congress.

In this connection it is proper to allude to the manner in which the directors conduct business at their meetings. Whenever anything is to be accomplished, as for instance the election of officers, a member who is advised of the purpose to be attained moves the appointment of a committee, sometimes naming the members thereof, who shall make the nominations for the officers, and their report is adopted without allowing an opportunity to the minority to express by vote or otherwise their preference for others. Thus the President, Gen. O. E. Babcock, the champion engineer of whisky rings, and his coterie of adherents have perpetuated their administration of the affairs of the Association.

The most important portion, however, of the history of this national lying-in asylum pertains to its medical management. To Dr. J. Harry Thompson* is due the credit of conceiving the project and engineering the bill, through Congress, incorporating the Association. He has enjoyed the honor, discharged the duties, and reaped the rewards of the office of surgeon-in-chief from its organization until the 20th of September last. Until the fall of 1875 he was practically the active and chief fiduciary officer, as well as the trusted surgeon of the institution. To him has been awarded the merit of securing the extraordinary appropriations from the treasury of the United States, and in his person were combined the major domo and factotum of the establishment, who purchased and dispensed with lavish generosity the supplies, hospital stores and necessary appurtenances. During the year 1875 the Board of Directors, impelled by the force of public opinion and the wide-spread rumors of wrong-doing, took measures at the annual meeting in September to reorganize the management of the institution, which culminated in December in the adoption of a code of regulations which legislated Dr. Thompson out of the direction and off the important committees; took from him the appointment of the resident physician and matron; curtailed his authority over the subordinates; and deprived him of the power of purchasing hospital stores and supplies. At the same time he was retained as surgeon-in-charge with a salary of \$2,000 per annum. The office of assistant surgeon was abolished, and at the same time there was organized an "Advisory and Consulting Board of physicians and surgeons," to consist of not more than eight medical gentlemen residing in the District of Columbia. This Board was required (by regulation 4, Chapter IX) to "present at each annual and semi-annual meeting to the Board of Directors, through their secretary, a report of the medical and surgical service of the hospital, with such recommendations in regard to securing its greater economy and efficiency as their

* The individual who has registered himself on the roster of the Medical Society of the District of Columbia as a graduate of the College of Physicians and Surgeons, London, but whom the Secretary of that institution declares is not a member.

observation may warrant. In addition to these reports, communications upon those and kindred topics by the Advisory Board, or a majority of those on duty, will be received by the Board of Directors through their secretary at any regular meeting and respectfully considered." In addition they were made "counselors" and required (one-fourth being on duty for three months in each year) to visit the hospital "once during each week," and at each visit to "report in writing, in a book kept for that purpose, the condition of the patients and building." It was further provided that "no capital operation shall be performed, except in cases of urgent necessity, without the approbation of at least three of the Consulting Board." These were wise, judicious, and needful regulations, exhibiting a spirit of reform, believed at the time to be sincere, and evincing a wish to prohibit and mitigate abuses admitted to exist by the enforced revision of their regulations and the adoption of the prohibitory by-laws.

The Advisory and Consulting Board entered upon the discharge of the duties required of them, as set forth in the foregoing extracts from the regulations; and in September, after nine months' service and observation, submitted to the annual meeting of the Board of Directors a report in writing, "with such recommendations in regard to securing its greater economy and efficiency as their observation" warranted. These recommendations were referred to a special committee, organized in the customary manner by resolution, naming the three constituents. After several months' deliberation the committee reported to the directors December 21st, 1876. This report succinctly sets forth both the recommendations made by the advisory and consulting physicians and those submitted by the special committee of the directors, and it was adopted. These propositions will be considered *seriatim*.

"The first resolution recommended by the Consulting Board is in these words:"

"At the request of the surgeon-in-chief the visiting physicians and surgeons may visit any particular patient as often as he (the surgeon-in-chief) may desire them; but in no case shall the surgeon-in-chief elect others than the visiting physicians and

surgeons to make such visit. All consultations shall be confined to members of the Consulting Board, and no surgical operation shall be performed except by the surgeon-in-chief, or, at his request, by some member of the Advisory Board."

This resolution the committee recommended the Board to approve, with the addition of the words "*except by request of the patient and with the approbation of the visiting physicians and surgeons,*" to the sentence ending with the words "such visits;" the insertion of the words "*except as above provided*" after the words "Consulting Board" in the next sentence, and the addition of the following words at the conclusion of the resolution; "*or other fully recognized members of the profession and with the approbation of the members of the Consulting Board.*"

It must be manifest to the most casual reader that the object of the advisory and consulting physicians, in making the recommendation set forth in the resolution above, was to prohibit existing irregularities in the medical management of patients; but the amendments suggested by the committee and approved by the directors not only failed to accomplish the object, but practically clothed the surgeon-in-chief with extraordinary authority and power to secrete, conceal and hide a patient in the house; for in a subsequent amendment it is provided "that no private patient shall be visited, examined or prescribed for by other than the surgeon-in-chief, unless by special request of such patient and in consultation with the surgeon-in-chief." Can it be that the Government of the United States has established and supports an institution in which women suffering from "diseases peculiar to the sex" are to be hidden and secluded from the visits and observation of any other than a surgeon whom the directors may select? By her "special request" she may be visited by another, but such request must come through the individual at whose will she is thus secluded.

2. "As to the resolution advising the removal of carpets from all sleeping apartments of patients, your committee recommend their removal from all rooms used for lying-in purposes; but that they be, for the present, allowed to remain in such private rooms not used for such purposes."

The object of this recommendation was to promote the hygienic

conditions of the house as well as in the interest of economy; but it was unfortunately in contravention of certain speculative tendencies, and carpets purchased at prices varying from \$2 to \$4 per yard contributed amazingly to the welfare of impecunious dealers.

3. "As to the recommendation to admit a member of the Consulting Board to all the meetings of the Board of Directors for purposes of mutual consultation and explanation, your committee are of the opinion that such admission is not necessary or advisable."

Of course not. It is not probable that a Board of Directors which had empowered its surgeon-in-chief to seclude and hide a sick woman at his will and pleasure would admit to its deliberations one of a Board of Physicians who were seeking to prevent such an act, for he would there confront them and their chosen agent, face to face, and be a living witness of their purposes and intent.

The fourth recommendation related to a conflict between two of the regulations, which was corrected.

5. "As to the proposition to abolish the salary of the surgeon-in-chief, your committee are of the opinion that this, for the present, would not promote the interests of the hospital. Arguments and considerations that would be of great force, if this were a hospital for general purposes, fail when we consider the prime fact that this is a hospital for special purposes, requiring special capacities and skill in its chief medical officer. We are of the opinion that it is wise for the Board of Directors to retain in their hands the power each year to regulate and fix the remuneration of its medical officers according to their judgment of what will best promote the prosperity of the hospital at that time."

If the committee and the directors had stopped with the simple denial of the proposition to abolish the salary, which was in exact accordance with the opinion of the physicians connected with the other medical institutions and charities in the city, it would have been accepted as the expression of their opinions, perhaps honestly entertained; but the reasons assigned clothed their refusal with a ludicrous gravity only becoming to a

directory that would invest the "chief medical officer" of a "hospital for special purposes" with power to conceal, hide and seclude from observation and visits sick women.

The sixth "recommendation, that the resident physician be appointed after a competitive examination by a Medical Board connected with the hospital, and be not allowed to engage in private practice," but required to devote his services to the hospital, was denied, and the appointment of such officer transferred to the surgeon-in-chief. The Government of the United States has adopted the system of competitive examinations for the admission of surgeons to the medical corps of the Army, Navy, and Marine Hospital Service, and for the admission of cadets to the West Point and Naval Academies, yet the wiseacres of Columbia Hospital pronounce this system a fallacy and a wrong when sought to be applied to a government "hospital for special purposes requiring special capacities and skill," and declare "its chief medical officer" more competent to select his subordinates than the surgeon-generals of the army, navy and marine hospital service, are to select the members of the medical corps serving under their direction. The reader will not fail to recognize the "special capacities and skill" and their adaptation to the "special purposes" of either "the chief medical officer" or of his coadjutors, who must be credited with a turgescence of special administrative capacities.

7. "As to the recommendation to abolish the duties (office) of the surgeon-in-chief and to transfer his duties to a medical staff, if this were a general hospital, your committee might concur; but as this is a hospital devoted to special purposes and to special diseases and accidents, we are of opinion that such a radical change would be unwise and disastrous to the best interest of the hospital, and therefore recommend that it be disapproved."

In consideration of the fact that the recommendation of the advisory and consulting physicians to transfer the medical management of the patients to a corps of physicians and surgeons was in exact accord with the methods in successful operation in the hospitals throughout this country, in England, Ireland, Scotland, France, and perhaps all over the civilized world, the action of the directors in rejecting the proposition proves, in-

contestably, their utter incapacity to properly manage the institution, and suggests a most extraordinary subserviency to the domination of unworthy and improper influences. The medical reader will recognize the comments of "your committee" as the obsolete dicta of a by-gone period and the mere repetition of the "argument and considerations" of men long afflicted with the "dry rot." To them the "special diseases and accidents" of women are such novelties that none other than one who might have been dismissed as an alarmist from an army in active operation could possess the "special capacities and skill" requisite for their treatment.

8. "Your committee also are of opinion that, unless in cases of emergency no examination of patients be made except by the surgeon-in-chief or by his express direction in each case, with such of the Consulting Board as he may select to assist him. But no private patient shall be visited, examined or prescribed for by other than the surgeon-in-chief, unless by special request of such patient and in consultation with the surgeon-in-chief."

Human nature is, fortunately, a very variable quantity and subject to many erratic deviations from any fixed standard. It is not always easy to estimate the mental calibre, or to interpret the animus of men by their written words. What this paragraph means seems plain enough, but what could have been the motives which prompted a Board of Directors in charge of a hospital founded by a beneficent government for the care and management of indigent sick women to call to their aid a Board of Advisory and Consulting Physicians and Surgeons, and then to limit their examination and observation to "cases of emergency" and such others as the surgeon-in-chief might direct? How, under the operation of such a rule, could mistakes in diagnosis and in treatment be detected and prevented? How could the poor, indigent sick woman be saved from unnecessary operations and mutilations of her person? It conferred upon a single officer absolute power to control the person of every female admitted to the hospital, and to subject her to such treatment as might suit his whims, caprices or unfortunate judgment without revision or examination by any other person whomsoever. Nay, more, without the knowledge of any other than such "as he may

select to assist him." And this regulation remains in force to-day the written evidence of audacious wrong and willful perversion of the trust confided to their keeping. But even this was not the crowning act. They struck from regulation 4, chapter IX, before quoted, all after the word hospital, and thus forbade the Advisory and Consulting Physicians and Surgeons from making any "recommendations in regard to securing its greater economy and efficiency." And now the dawn begins to illuminate the darkened picture and to bring into view its hidden features and emasculated form. The seclusion of patients; the concealment of mistakes and wrong-doing; the lavish expenditures without accountability; the individual self-aggrandizement; and the subserviency to the behests of a controlling ring are emblazoned in indelible characters upon the illumined canvas.

This series of amended rules, "unanimously approved by the Board of Directors," and after being certified to by "O. E. Babcock, President," were sent to the Board of Advisory and Consulting Physicians and Surgeons. No one will be surprised to learn that they all resigned (see letter of resignation dated February 2, 1877); but many medical men will grieve to know that others sought and secured appointment to the vacancies. The Consulting Board, however, was not filled to half its proper number until the annual meeting in September last. Soon after this wholesale resignation of the original Advisory and Consulting Board, the trusted surgeon-in-charge applied for and obtained a leave of absence for six months to visit Europe, and sailed about the first of June. He had not departed from the shores of his adopted country before rumor credited his long contemplated visit to the "old homestead" on the Thames, with a sojourn beyond the reach of investigating committees, and speedily came rumors also of intrigue to secure the contemplated vacancy in the office of surgeon-in-charge of the hospital. Our committee who had so exultantly affixed their signs manual to the certificate attesting his "special capacities and skill"—which certificate had furthermore been unanimously approved by their coadjutors and certified to by "O. E. Babcock, President"—began, as the gamblers say, to hedge and to seek some pathway hitherto

unknown to hospital management by which to escape from the dilemma in which they would find themselves in the event a vacancy should occur in the office of surgeon-in-charge. They struck out boldly for originality. Competitive examinations and division of labor by a properly arranged and selected corps of physicians and surgeons (as is almost the universal mode of hospital management,) were to them obsolete methods, and inadequate to secure "special capacities and skill" in the medical officers of a hospital "devoted to special purposes and to special diseases and accidents." And so it may be, for the "special purposes" so vividly delineated in the features of the mongrel group of talismanic characters shown on the illumined canvas are not the common attributes of simple-minded men, but the acquired accomplishments of individuals after long and patient tuition in the school where virtue is not taught.

The Directors assembled in the spacious and luxuriously furnished office at the hospital building on the night of the 20th of September last, and across the hallway in the elegant parlor sat the aspirants for coming honors, some blushing with hopeful expectations and others pallid with apprehensions of disappointment, but all merry, like poor boys at a frolic, for Thompson—it must be spelled with a "p"—had resigned, and the door-plate had been removed.

The heavy office door swung to, the window sashes were fastened down, the president, enrobed in the vestments of his office, called to order, and the members, in dignified silence, sat erect in their cushioned chairs. After an invocation to the Congress of the United States for a continuance of its munificent donations, a member arose and with oppressive gravity announced "the resignation of Dr. J. Harry Thompson." Of course it was referred to a "special" committee for consideration and report. The resignation was accepted; the office of surgeon-in-charge abolished, and the duties of the office transferred to the resident physician on condition that he would supply a person to remain in the building during his absence in attendance upon his private practice outside of the hospital. The salary of the resident physician was increased from \$1,000 to \$1,800 per annum, and a salary of \$1,000 per annum was voted to the treasurer of the

institution. Heretofore the office of treasurer had not been salaried, but it has been currently reported that the officer had been allowed a commission for disbursing the appropriation made by Congress, which was paid out of the fund derived from the "pay-patients." Recently Mr. Secretary Schurz had required, in accordance with the law, that all money received from this source should be paid into the Treasury of the United States, and if this was done commissions could not be paid to the treasurer, as the accounting officers of the United States Treasury would not allow them in the account. The payment of a salary was the device to circumvent the action of the Secretary. Will the honorable Secretary submit? Will the people of this country silently acquiesce in this impudent defiance of authority and law? Will the law-making power permit a charter to continue in force which sanctions the payment of salaries to its officers from the national treasury in direct contravention of the law?

No one in this community will impugn the personal integrity of the resident physician, a graduate of some five years' standing, and a man of more than average ability. His friends cherish the hope that he will prove equal to the grave responsibility which has been devolved upon him; but others have quailed under less responsibility and frittered away golden opportunities under improper influences. Fortunate indeed will it prove for the institution if he can surmount the obstacles in his way and emerge from the ruins unharmed. With a salary of \$1,800 per annum; a commissariat suitable to the most refined tastes; all the appurtenances of a spacious dwelling; the use of a library and an abundant supplied instrument-case, together with the privileges of a private practice, and all the advantages accruing to an institution supported by the bounty of the General Government, it would not be surprising if one less self-reliant and capable should track the foot-prints of his predecessor.

But the old regime continues in possession; the previously cited rules and regulations remain in force. To the reorganization of this Management the Medical Profession of this country and the Congress of the United States must address themselves.

The former can not afford to hold its peace and sit idly by whilst a gigantic corporation, deriving its maintenance from the common treasury, is inviting to its spacious wards and to luxurious ease the sick women from all parts of the country. Nor can it with dignity and self-respect withhold its antagonism to an institution which is bringing dishonor to hospital management. To this end, then, it behooves every individual member of the Profession to appeal to his representative in Congress to place this institution under such government as will conduce to economy and efficiency, and redound to the honor of its munificent benefactor and to the credit of the Medical Profession. Transfer the appointment of the directors to the President of the United States, by and with the advice and consent of the Senate, and divide them into four classes, with terms of service of four years' duration, so that one-third will go out of office annually. Restore the disbursement of the appropriation to the Treasury of the United States, and require that all funds belonging to the institution, from whatever source derived, be deposited in the National Treasury. Destroy the boarding-house feature of the institution, and forbid the payment of salaries to any medical officer. It is idle to rely upon investigating committees. During the last Congress the House of Representatives passed a resolution directing the Committee on the District of Columbia to investigate this institution, but no amount of dragooning could force the chairman to commence the investigation. Committees can be packed, and individual members too often prove too weak to resist the blandishments of the corrupt rings which infest the Capital. The directory, with "O. E. Babcock, President," is a powerful combination; bold, imperious, and defiant, and will not fail to seek the destruction of any man who may uplift his hand against their wrongs and usurpations. Then to the defense of right and condemnation of wrong let every medical man throughout this land lend his aid. "Mene! Mene! tekel upharsin."

